## **TITLE COMPANIES**

COMPANY NAME:		NAIC Company Code:				
Contact:		Telephone:				
PEOLITED FILINGS IN THE STATE OF	Maine	Filings Made During the Year 2004				

(1) Check- List	(2) Line	(3) REQUIRED FILING FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM	(7) APPLICABLE
	#		Domestic		Foreign	Postmarked	SOURCE**	NOTES
			State	NAIC	State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 ½" x 14")	XXX	1	XXX	3/1	NAIC	N
2	1.1	Printed Investment Schedule detail (Pages E01- E26)	XXX	1	XXX	3/1	NAIC	N
	2	Quarterly Financial Statement (8 ½" x 14")	XXX	1	XXX	5/15, 8/15, 11/15	NAIC	N
			XXX		XXX			
		II. NAIC SUPPLEMENTS	XXX		XXX			
	11	Investment Risk Interrogatories	XXX	1	XXX	4/1	NAIC	N
12 13 14 15 16 17 30 31 34 35 37 38 33 33 51 51 52 53 54	12	Management Discussion & Analysis	XXX	1	XXX	4/1	Company	N
	13	Schedule SIS	XXX	N/A	XXX	3/1	NAIC	N
	14	Statement of Actuarial Opinion	XXX	1	XXX	3/1	Company	N
	15	Supplemental Compensation Exhibit <sup>1</sup>	1	N/A	N/A	3/1	NAIC	0
	16	Supplemental Schedule of Business Written By Agency	XXX	1	XXX	4/1	NAIC	N
	17	SVO Compliance Certification	XXX	1	XXX	3/1, 5/15, 8/15, 11/15	NAIC	N
		III. ELECTRONIC FILING REQUIREMENTS						
	30	Annual Statement Electronic Filing	XXX	1	XXX	3/1	NAIC	N
	31	March .PDF Filing	XXX	1	XXX	3/1	NAIC	N
	34	Supplemental Electronic Filing	XXX	1	XXX	4/1	NAIC	N
	35	Supplemental .PDF Filing	XXX	1	XXX	4/1	NAIC	N
	37	Quarterly Electronic Filing	XXX	1	XXX	5/15, 8/15, 11/15	NAIC	N
		Quarterly .PDF Filing	XXX	1	XXX	5/15, 8/15, 11/15	NAIC	N
	33	June .PDF Filing	XXX	1	XXX	6/1	NAIC	N
		IV. AUDITED FINANCIAL STATEMENTS						
	51	Accountants Letter of Qualifications	XXX	N/A	XXX		Company	N
		Audited Financial Statements	XXX	1	XXX	6/1	Company	N
		Audited Financial Statements Exemption Affidavit	XXX	N/A	XXX		Company	N
		Independent CPA	XXX	N/A	XXX		Company	N
		Notification of Adverse Financial Condition	XXX	N/A	XXX		Company	N
	56	Report of Significant Deficiencies in Internal Controls	XXX	N/A	XXX		Company	N
101 102 103	57	Request for Exemption to File	XXX	N/A	XXX		Company	N
		V. STATE REQUIRED FILINGS						
	101	Filings Checklist (with Column 1 completed)	XXX	1	XXX		State	N
		State Filing Fees	XXX	0	XXX		State	C, P
		Affidavit of Filing	XXX	0	XXX		State	N
	104	Premium Tax	XXX	0	1		0.0.0	0

<sup>&</sup>lt;sup>1</sup> The Supplemental Compensation Exhibit is no longer considered confidential and will be made available to the public. This exhibit must be filed with the annual statement.

<sup>\*</sup>If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and the NAIC and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state.

<sup>\*\*</sup>If Form Source is NAIC, the form should be obtained from the appropriate vendor.